

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          | 49     | 2/1/01   |
| FORMALITY REVIEW          | HA       | 858    | 07-21-01 |
| RESPONSE FORMALITY REVIEW | Zm       | 927    | 05/31/01 |

# INDEX OF CLAIMS

|                     |            |   |              |
|---------------------|------------|---|--------------|
| ✓                   | Rejected   | N | Non-elected  |
| =                   | Allowed    | I | Interference |
| - (Through numeral) | Canceled   | A | Appeal       |
| +                   | Restricted | O | Objected     |

| Claim    | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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